Approved for use through 07/31/2006. OMB 0651-0032

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UTILITY PATENT APPLICATION **TRANSMITTAL**

MOTO BCS03192 Attorney Docket No. First Inventor Garrison METHOD AND APPARATUS FOR REPRESENTING STORAGE Title CAPACITY ALLOCATION OF AN AUDIO/VIDEO RECORDING

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Express Mail Label No.

	ADDI	ICATION E	LEMENTS		Mail Stop Patent Application									
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.						ADDRESS TO: Commissioner for Patents P.O. Box 1450								
	<u> </u>		·:	ontens.	Alexandria, VA 22313-1450									
	ee Transmittal Submit an original an				7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)									
	pplicant claims				8. Nucleotide and/or Amino Acid Sequence Submission									
	ee 37 CFR 1.2				(if applicable, all necessary)									
	pecification preferred arranger		[Total Pages	14]	a. Computer Readable Form (CRF)									
- 1	Descriptive title o	f the Invention	•		 b. Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies); or 									
 Cross Reference to Related Applications Statement Regarding Fed sponsored R & D 						ii. 🔲 paper								
- 1	Reference to seq	uence listing, a t	table,		c. Statements verifying identity of above copies									
or a computer program listing appendix - Background of the Invention						ACCOMPANYING APPLICATIONS PARTS								
- Brief Summary of the Invention						9. Assignment Papers (cover sheet & document(s))								
Brief Description of the Drawings (if filed) Detailed Description						10. ☐ 37 C.F.R.§3.73(b) Statement ⊠ Power of								
- (Claim(s)					(when the	re is an assigne	ee) Attorney						
- Abstract of the Disclosure						11. English Translation Document (if applicable)								
4. Drawing(s) (35 U.S.C.113) [Total Sheets 4]						12. Information Disclosure Copies of IDS								
5. Oath or Declaration [Total Pages]						Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment								
a. Newly executed (original or copy)						<u> </u>								
b. Ц	Copy from a p				14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)									
_	(for a continua			ompleted)	15. Certified Copy of Priority Document(s)									
i. <u>L</u>	DELETION Signed stateme				(if foreign priority is claimed)									
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR						16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35								
	1.63(d)(2) and 1	• •			or its equivalent.									
6.	lication Data S	heet. See 37	CFR 1.76		17. Other:									
18 If a CON	49. If a CONTINUING APPLICATION, shock contradicts have and quarkets and significant and signi													
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:														
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: /														
Prior application information: Examiner Group / Art Unit:														
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied														
under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.														
17. CORRESPONDENCE ADDRESS														
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☐ Custom	er Number or Ba	r Code Label	(Insert Custo	mer No. or Att	ach bar code	e lahel here)	or ⊠ Co	rrespondence address below						
Name	e Kin-Wah Tong													
	Moser, Patte	rson & Sherida	an, LLP					•						
Address	Suite 100													
City	Shrewsbury		State			Zip Code	07702							
Country	USA Telephone				732 530-	9404	Fax	732 530-9808						
Name (Print/Type) Car		Caroline T.	Goker		Registratio	n No. (Attorr	ney/Agent)	50,516						
Signature		Inh	MM		<u> </u>		Date	12/17/03						

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon on the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent, Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL	Complete if Known										
	Application Number Not			Not Y	t Yet Assigned						
for FY 2003	Filing Date H			Here	ewith						
Effective 01/01/2003. Patent fees are subject to annual revision.	First Named Inventor G			Garri	rison						
Applicant Claims small entity status. See 37 CFR 1.27	Examiner Name No			Not Y	Yet Assigned						
- present diamediant diamediant, status. See 61 G17 1.21	Group / Art Unit No			Not Y	Yet Assigned						
TOTAL AMOUNT OF PAYMENT (\$) 770	Attorney Docket No. MO				TO BCS03192						
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)										
Check Credit Card Money Other None	3. ADDITIONAL FEES										
Order Deposit Account	Large Fee	Entity	Small Fee	Entity			E				
Deposit	Code	(\$)	Code	Fee (\$)	Fee D	Description	Fee Paid				
Account Number 502117	1051	130	2051	65	Surcharge - late	_					
Denosit	1052	50	2052	25	Surcharge - late or cover sheet.	provisional filing fee					
Account Name Motorola	1053	130	1053	130	Non-English spe	cification					
The Director is authorized to: (Check all that apply)	1812	2,520	1812	2,520	For filing a reque	est for reexamination					
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	920*	Requesting publi Examiner action	ication of SIR prior to					
Charge any additional fee(s) during pendency of this application	1805	1,840*	1805	1,840*	Requesting publi Examiner action	ication of SIR after					
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account	1251	110	2251	55	•	oly within first month					
FEE CALCULATION	1252	420	2252	210	Extension for rep	oly within second					
1. BASIC FILING FEE	1253	950	2253	475	Extension for reg	oly within third month					
Large Entity Small Entity	1254	1,480	2254	740	Extension for rep	oly within fourth					
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	1255	2,010	2255	1,005	Extension for rep	oly within fifth month					
1001 770 2001 385 Utility filing fee 770	1401	330	2401	165	Notice of Appeal						
1002 340 2002 170 Design filing fee	1402	330	2402	165	Filing a brief in s	upport of an appeal					
1003 530 2003 265 Plant filing fee	1403	290	2403	145	Request for oral	_					
1004 770 2004 385 Reissue filing fee	1451	1,510	2451	1,510	Petition to institu proceeding	ite a public use					
1005 160 2005 80 Provisional filling fee	1452	110	2452	55	Petition to revive	- unavoidable					
SUBTOTAL (1) (\$) 770	1453	1,330	2453	665	Petition to revive – unintentional						
2. EXTRA CLAIM FEES	1501	1,330	2501	665	Utility issue fee (•					
Extra Fee from Fee	1502 1503	480 640	2502 2503	240 320	Design issue fee Plant issue fee	1					
Claims below Paid	1460	130	1460	130	Petitions to the (Commissioner					
Total Claims 20 -20 ** = 0 X 18 = 0	1807	50	1807	50		inder 37 CFR 1.17 (g)					
Independent Claims 3 -3 ** = 0 X 86 = 0	1806	180	1806	180	_	formation Disclosure					
Multiple Dependent X = 0	8021	40	8021	40	Recording each per property (tim	patent assignment .					
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee	1809	770	2809	385	properties) Filino a submissi	ion after final rejection					
Code (\$) Code (\$) Fee Description					(37 ČFR § 1.129	(a))					
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))						
1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385	Request for Continu	ued Examination (RCE)					
1204 86 2204 43 ** Reissue independent claims over original patent	1802	900	1802	900	Request for exped	ited examination					
1205 18 2205 9 "Reissue claims in excess of 20 and over original patent	Other fe	of a design application									
Over original patent	Outer le	Other fee (specify)									
SUBTOTAL (2) (\$) 0	*Reduc	*Reduced by Basic Filing Fee Paid SUBTOTAL (3)					7				
**or number previously paid, if greater, For Reissues, see above					(\$) 0						
SUBMITTED BY Complete (if applicable)											
Name (Print/Type) Caroline T. Coked Registration No. Attorne	y/Agent)	50,5	16		Telephone	(215) 323-1797					
Signature / ////					Date	12/17/03	J				

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